

Please submit by email to <a href="mailto:ron.buckhalt@maryland.gov">ron.buckhalt@maryland.gov</a>
Or by mail to Ron Buckhalt, Director Seafood Marketing, Maryland Department of Agriculture, 50 Harry S. Truman Parkway, Annapolis, MD 21401.

## True Blue Participant Application

Business Name		
		ne Number
Address		
City		
State Zip		
Email		
Twitter: @	Website	
Business Type: Restaurant		
Caterer Other Approximate amount of crab	used/sold weekly?	 (optional)
Number of menu items featur		
Do you use Fresh / Pasteurize		
Do you plan to use any non-M		—
establishment must be harvested of program, an approved food service upon request to the Maryland Depenstablishment to use the True Blue amount of Maryland product being establishment found to not be in c	and/or processed in the sta e establishment agrees to p partment of Agriculture for p e logo in a manner that is no g used or the establishment ompliance or violating the p	o product used annually in a participating food service of Maryland. In accordance with the True Blue periodically submit copies of sales receipts and invoice product verification. It is the responsibility of the out misrepresentative to the consumer about the tries involvement in the program. Any food service terms of the program may have its membership be Blue will provide materials for marketing purposes
For initial application, please subm landed in Maryland.	nit four (4) recent (last six m	nonths) invoices showing purchase of Blue Crabs
Authorized	Signature	